



# SOMERSET COUNTY BOARD OF ELECTIONS

P.O. Box 3000, 20 Grove Street  
Somerville, NJ 08876-1262

Phone: (908) 231-7086 • (908) 231-7089 • Fax (908) 231-9465



# Poll Worker Application

Please print **clearly** in ink

1. \_\_\_\_\_  
First Name Middle Last Name

2. \_\_\_\_\_  
Address City Zip Code

3. \_\_\_\_\_  
Mailing Address (if different than above)

4. \_\_\_\_\_  
Landline Phone # Cell Phone #

Check Primary Contact Number:

Landline  Cell

5. \_\_\_\_\_  
Social Security # (for new applicants) Email Address

6. Are you a Registered Voter in Somerset County?  Yes  No

7. Have you ever served as a Poll Worker?  Yes  No

8. Would you accept assignment to another town in Somerset County?  
If you checked yes, please list below what town(s) you prefer.

\_\_\_\_\_  
\_\_\_\_\_

9. State the Political Party to which you belong. \_\_\_\_\_

10. Do you speak any other language in addition to English?  Yes  No  
If you checked yes, what language(s)?

\_\_\_\_\_

Signature

Date

Please mail or fax this completed form to the address above.

**Note: Candidates for any elected office CANNOT serve as Poll Workers.**  
**\*\*\*\* COUNTY EMPLOYEES CANNOT SERVE AS POLL WORKERS. \*\*\*\***